



The Redhill  
Academy

## APPLICATION FORM FOR A PLACE AT THE REDHILL ACADEMY

Before completing this form parents are strongly advised to look at our admissions criteria on the school's website [www.theredhillacademy.org.uk](http://www.theredhillacademy.org.uk)

Please fill in this form using black ink and CAPITAL LETTERS

### SECTION A - YOUR CHILD

Full Legal Name:			
Date of Birth:		Gender (Male/Female):	
Current/Previous School:		Current School Year:	
Current/New Address:	Postcode:		
Previous Address (if applicable):	Postcode:		
Date of Move to New Address:			

### SECTION B - SIBLINGS ALREADY ATTENDING OR APPLYING FOR THE REDHILL ACADEMY

Full Name	Date of Birth	Gender (please tick)		School Attending or Applied For			
		Male	Female				
		<input type="checkbox"/>	<input type="checkbox"/>				
		<input type="checkbox"/>	<input type="checkbox"/>				
Is the home address of the brother or sister the same as that in Section A?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If "no" please give full address:							
Postcode:							
Reason for different address:							

### SECTION C - PARTICULAR CIRCUMSTANCES OF YOUR CHILD

Is your child in public care (often referred to as "looked after" by the local authority)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Does your child have a Statement of Special Needs	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If you have ticked yes in any of the above boxes, please name the local authority				

## SECTION D - PARENT DETAILS

Full Name (include title, eg Mr, Mrs, Ms):			
Relationship to Child:			
Do you have parental responsibility for this child?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Your Address (if it is different from your child's address):	Postcode:		
Reason for different address:			
Telephone Numbers:	Home	Work	Mobile
Email Address:			

## SECTION E - OTHER QUESTIONS

Is this request due to:			
Change of Address	<input type="checkbox"/>	Behaviour Issues	<input type="checkbox"/>
Poor Attendance	<input type="checkbox"/>	Bullying	<input type="checkbox"/>
At risk of permanent exclusion	<input type="checkbox"/>	Other (please specify in space below):	<input type="checkbox"/>

Has your child ever been excluded on a fixed term basis from a school?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If "yes" please give details below:				
			Date of Exclusion(s):	

Has your child ever been permanently excluded from a school?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If "yes" please state which school and when in the space below:				
Name of School:			Date of Exclusion:	

## SECTION F - DECLARATION

1. I certify that the information given on this form is correct. I understand that a fraudulent or intentionally misleading application could result in any offer of a place being withdrawn.
2. I have checked that all those with parental responsibility are in agreement with this application.

Signature or Full Name of Parent:

Date:

Please return this form to: **Mr N Thornley, Admissions Officer**  
**The Redhill Academy**  
**Redhill Road, Arnold**  
**Nottingham NG5 8GX**